CALIFORNIA STATE DEPARTMENT OF PUBLIC HEALTH

GILES S. PORTER, M.D., Director



STATE BOARD OF PUBLIC HEALTH

JOHN H. GRAVES, M.D., President EDWARD M. PALLETTE, M.D., Vice President GEORGE H. KRESS, M.D. JUNIUS B. HARRIS, M.D. WM. R. P. CLARK, M.D. GIFFORD L. SOBEY, M.D. GILES S. PORTER, M.D.

Entered as second-class matter February 21, 1922, at the post office at Sacramento, California, under the Act of August 24, 1912.

Acceptance for mailing at special rate of postage provided for in Section 1103, Act of October 3, 1917.

Vol. XII, No. 4

February 25, 1933

GUY P. JONES

A Dead Baby Carried Through Storm-torn Hills

Diphtheria in the rural districts of the State constitutes an important problem and how disastrous the ravages of this disease may be is told by Dr. Allen F. Gillihan, health officer of San Luis Obispo County, in the following article which appeared in his monthly report for January:

"The epidemic of diphtheria, which has been statewide since last summer, left its impression on this county. Most likely some children while on their summer vacation, although immune themselves to diphtheria, nevertheless picked up the organism causing the disease in their association with strangers, while camping. On their return home they distributed the organisms to their associates, who did not have protection against the disease.

Diphtheria Cases Reported San Arroyo							
1932-33	Luis City	Obispo Rural	Paso City	Robles Rural	Gro City	nde Rural	Total
September	9	1			1	1	12
October	9	2				1	12
November	4					1	5
December	3						3
January	3	1					4
Total							36

The protective effect of immunizing against diphtheria is well illustrated in the above table by the entire absence of the disease from the city of Paso Robles and its surrounding territory. Several years ago diphtheria was present among school children in Paso Robles; hardly a month went by without several new cases being reported. This was brought to the attention of the school board, an immunization

campaign started, and a large proportion of the school children was immunized.

Every year a class graduates from a school and a new class moves in. Unless each new class is immunized, in six or seven years an entire unprotected school population has replaced the immunized population. This is merely another way of saying that when a school population has once been immunized, it is necessary to immunize the incoming class each year to keep the whole school population protected.

Of the 36 reported cases during the past five months, four died. Unfortunately these deaths were not diagnosed during life and they never received diphtheria antitoxin. If swabs had been taken early in the sickness, examined in the laboratory, and the presence of diphtheria organisms proven, these children could have received antitoxin early in their sickness and their lives saved.

The last death from diphtheria, one that occurred in January, was most pathetic. In the Irish Hills lives an unfortunate family of parents and twelve children. During the rain storm of January the mountain roads were washed out and two bridges carried away. During the storm the youngest baby was noticed to be sick. They could not seek advice, and the next day the baby died. The father brought the body over the hills to Arroyo Grande to the undertaker, who communicated with me about obtaining a burial permit. I communicated with the Coroner who authorized a post mortem. This was held, and

it was discovered the baby had died of laryngeal diphtheria and lobar pneumonia. As the father had left the information of similar sickness in two or three of the other children, and the downpour of rain having decreased, a physician was sent to the place. He made a horseback ride of about nine hours over dangerous mountain trails. He discovered two children with membranes in their throats, gave them large doses of antitoxin, and gave the other nine children each a protecting dose of antitoxin. Swabs showed that three of the children had diphtheria organisms, but owing to the prompt use of antitoxin the condition subsided without any further cases developing.

As several of the children had attended the nearby rural school while there was sickness in the family, the two nurses from this department made the hazardous trip over the mountains to the school on horseback. Most of the children of this small rural school were swabbed for diphtheria, but nothing further was discovered, and no further cases have developed in this section.

This spring the county health department intends to carry on a diphtheria immunization compaign in an endeavor to immunize as many of the children of this small rural district as possible. Special effort by the department will be made during the coming summer in all rural sections that may be isolated during winter storms to protect the children against diphtheria and smallpox. These diseases require several days to incubate, and during the period of incubation, a winter storm may cut off a region exactly as occurred in the Irish Hills district last month."

NORTHERN CALIFORNIA PUBLIC HEALTH ASSOCIATION TO MEET

The Northern California Public Health Association will hold its regular annual meeting at the Women's City Club, San Francisco, Saturday evening, March 4, 1933. Dr. Benjamin W. Black of Oakland, Director of Hospitals, Alameda County, will deliver an address upon the subject of the Alameda County public health program. Election of officers for the coming year will be held. A large attendance is expected at this meeting. Dr. Thomas A. Storey of Stanford University is president of the association and Dr. Walter H. Brown of Stanford University is secretary.

The layman can gain a fair idea of the manner in which tuberculosis affects the tissues by noting the mould seen in bread and cheese.—F. M. Pottenger.

DR. PARK TO CONDUCT INSTITUTE

Dr. Walter H. Brown, secretary of the Northern California Public Health Association, has announced a most outstanding public health institute to be held under the auspices of the association in San Francisco March 16, 17 and 18. Dr. William H. Park, Director of Laboratories of the New York City Health Department, will be the principal speaker at this institute, which will be held in the auditorium of the new San Francisco Health Center at Polk and Grove streets, Civic Center. On the evening of Thursday, March 16, there will be a public meeting at which Dr. Park and other speakers will discuss in general, the control of communicable diseases. On the following days, Friday and Saturday, March 17 and 18, a two-day institute, the theme of which is the control of communicable diseases, will be conducted at no cost and open to all public health workers in northern California. Dr. Park will make several addresses and, in addition, four sections will be organized for purposes of discussing the following topics.

- 1. Administrative control of communicable diseases.
 - 2. Laboratory control of communicable diseases.
- 3. Public health information with reference to communicable diseases.
- 4. The control of communicable disease through food, water, and milk.

Dr. Thomas A. Storey, president of the association, has appointed a committee which is actively at work in the preparation of a detailed program which will be announced at an early date. It is doubtful that public health workers in northern California have ever had a better opportunity to develop their professional information upon these important subjects relating to the control of communicable diseases

A similar institute will be conducted by Dr. Park under the auspices of the Southern California Public Health Association in Los Angeles. Dr. Park will also be the principal speaker at the annual meeting of the California Tuberculosis Association, to be held in San Diego during the present month.

The Northern California institute will be held through the Cooperation of the California Tuberculosis Association and Dr. J. C. Geiger, Health Officer of San Francisco.

CHANGE IN HEALTH OFFICERS

Dr. E. R. Jackson has been appointed city health officer of El Cerrito to succeed Dr. F. L. Horne.

TYPHOID FEVER STILL A PROBLEM

In spite of the fact that the typhoid fever death rate has been reduced greatly, the control of the disease in many communities of the State is still an important problem. This is true, particularly, along some of the inland rivers, notably in the delta region of the San Joaquin and Sacramento Rivers. In those districts, where water from irrigation ditches is used for drinking purposes, typhoid fever control is also an acute problem. In Imperial County, for example, there are 2460 miles of irrigation canals, furnishing the major portion of the domestic water supply for the residents of the valley. Typhoid fever is a major problem in such a district and it will probably always be a problem in Imperial County. In future years, when the All-American canal is built and completed and the desilting works put in operation, there may perhaps be an increase in the numbers of cases that occur. In spite of educational work undertaken, a large percentage of the population still drinks untreated ditch water. The county health department advocates the use of filters. These can be used only where there is a high canal bank, however. Through their use, a clear water of low bacterial count is made possible. In some places, dairymen are now using filtered ditch water for their cattle.

Transient laborers in the Imperial Valley, where large acreages are devoted to the growing of peas and lettuce, constitute an important factor in the control of typhoid fever. Such laborers often live under conditions that are far from sanitary and except in unusual instances they are not found in the regularly maintained labor camps. As a matter of fact, it has been suggested that centralized labor camps which may be patrolled sanitarily should be set up in various parts of the county. This would do away with the presence of such camps on the banks of irrigation ditches and along the highways. In the past it has been customary to place such labor camps directly on ditch banks. The contamination of ditch water under such circumstances is a natural result. It has been recommended by the health officer of the county, Dr. Warren F. Fox, that privies, mule corrals and other corrals besides the camp proper, be placed at least 50 feet from irrigation ditches.

The economic depression has hindered greatly the installation of essential sanitary equipment. With 2460 miles of open irrigation ditches furnishing the domestic water supply, it is important that individuals using this water should boil it or treat it chemically, and such individuals should also be protected through typhoid vaccination.

The centralization of labor camps and the establishment of all camps at a distance from irrigation ditches are also important in the control of typhoid fever in this district.

PREVALENCE OF SYPHILIS AND GONORRHEA

Both syphilis and gonococcal infections rank among the "Big Six" of infectious diseases. No serious infectious disease except measles outranks syphilis, and gonorrhea ranks fifth or sixth, in the number of cases reported to the health authorities of the United States. Census studies by the American Social Hygiene Association and the United States Public Health Service in 25 millions of the population indicate that today almost 1 per cent of the people of this country are under medical care for syphilis or gonococcal infections, and it is well known that this represents but the minimum number of existing cases. There are, in addition, other hundreds of thousands who resort, through ignorance, to quacks and druggists, and still others who receive no medical treatment whatever, or have ceased to go to the doctors or clinics for treatment.

SEWAGE WORK STATISTICS AVAILABLE

The Bureau of Sanitary Engineering of the State Department of Public Health has prepared a compilation, in tabular form, of certain general statistics of sewage works for all California cities, towns and sanitary districts, such statistics having been based upon surveys made during the period 1930-1933. The tabulations give the following information: (a) name of governmental unit, (b) date of survey, (c) owner of sewer system, (d) total population, (e) population having access to sewers, (f) population connected, (g) date of first sewers, (h) per cent population served, (i) whether separate or combined sewers, (j) miles of sanitary sewers (if known), (k) date of first disposal works, (l) population served by disposal works, and (m) thumbnail sketch of treatment works and place of disposal of final effluent.

At the present time, it is not possible to have this compilation printed at State expense, but the set of statistics is made available as a black line print and may be obtained from any blue-printing company in Oakland which will agree to return the manuscript to the Bureau of Sanitary Engineering. Remittance should not be made in favor of the bureau, but, rather, in favor of the blue print company which may copy the manuscript. This compilation covers thirty pages, size $8\frac{1}{2} \times 13$ inches, and contains sewage work data for 313 California communities.

PROTECTION OF THE UNBORN CHILD

One out of every 12 pregnant women examined in 15 clinics in various American cities had syphilis. This disease is communicable from mother to child before birth. If the child becomes infected, he is likely to be born prematurely or born dead or die in early infancy. If he survives infancy, he is likely never to be a healthy, happy child but instead may suffer always mentally or physically under the handicaps imposed by hereditary syphilis.

With suitable treatment early in pregnancy, 95 per cent of these pregnancies would end in the birth of babies free from any evidence of lurking disease, and mothers free from the disease or in a condition in which the disease may be thoroughly controlled. In the words of Dr. Ray Lyman Wilbur, "When we can keep the spirochete of syphilis out of the body of every newborn babe, we shall have added enough to human life and happiness to heal the wounds of the Great War."

MORBIDITY*

Diphtheria

52 cases of diphtheria have been reported, as follows: Oakland 3, Fresno County 1, Brawley 1, Kern County 1, Bakersfield 1, Alhambra 1, Compton 1, Glendale 3, Long Beach 1, Los Angeles 25, Hawthorne 1, Monterey County 2, Carmel 2, Pacific Grove 1, Riverside 1, San Bernardino County 2, Oceanside 2, San Francisco 1, Santa Clara County 1, Davis 1.

Influenza

129 cases of influenza have been reported. Those communities reporting 10 or more cases are as follows: Los Angeles County 16, Los Angeles 29, San Francisco 23.

Measles

449 cases of measles have been reported. Those communities reporting 10 or more cases are as follows: Los Angeles County 65, Glendale 43, Long Beach 37, Los Angeles 185, South Gate 12, Maywood 22.

Scarlet Fever

208 cases of scarlet fever have been reported. Those communities reporting 10 or more cases are as follows: Fresno County 13, Los Angeles County 16, Los Angeles 77.

Whooping Cough

274 cases of whooping cough have been reported.

* From reports received on February 20th and 21st for week ending February 18th.

Those communities reporting 10 or more cases are as follows: Berkeley 14, Oakland 10, Los Angeles County 19, Los Angeles 25, Monterey County 11, San Francisco 64, San Joaquin County 12, Stockton 10.

Smallpox

33 cases of smallpox have been reported, as follows: Los Angeles County 3, Los Angeles 23, San Jose 6, Willow Glen 1.

Typhoid Fever

4 cases of typhoid fever have been reported, as follows: Los Angeles 1, Sacramento County 2, San Joaquin County 1.

Meningitis (Epidemic)

3 cases of epidemic meningitis have been reported, as follows: Los Angeles County 1, San Francisco 2.

Poliomyelitis

One case of poliomyelitis from Los Angeles has been reported.

Encephalitis (Epidemic)

2 cases of epidemic encephalitis have been reported, as follows: Fullerton 1, San Francisco 1.

Typhus Fever

One case of typhus fever from Los Angeles has been reported.

Food Poisoning

12 cases of food poisoning from San Diego have been reported.

Undulant Fever

3 cases of undulant fever have been reported, as follows: Los Angeles 2, Riverside 1.

Coccidioidal Granuloma

2 cases of coccidioidal granuloma from Kern County and Taft have been reported.

Septic Sore Throat

3 cases of septic sore throat have been reported, as follows: Oakland 1, Los Angeles County 1, San Bernardino County 1.

U C MEDICAL SCHOOL
LIBRARY
PARNASSUS & THIRD A
SAN FRANCISCO CALIF